



## **II. RELEVANT FACTUAL SUMMARY**

1. In paragraph 1 of her Application to Proceed Without Prepayment of Fees and Affidavit, she declares under the penalty of perjury that “I have been off job (sic) for 6 months due to stress. I have not received any pay during that time due to using all of my leave.” In paragraph 2, Dukes acknowledges she is married, but contends she has been separated for five years (DKT # 1).

2. On November 16, 2004, in case 04-CA-0743-SS, Dukes filed her Application to Proceed Without Prepayment of Fees and Affidavit. In paragraph 2 she acknowledges that she is employed but has been on sick leave for 5 months **with no income**. (Emphasis added). (DKT # 1).

3. Dukes began her leave without pay status on Monday, June 28, 2004. (DKT 1, July 12, 2004 memorandum from Mary Lechler). On July 14, 2004, Dukes’ Supervisor, Mildred Erickson, submitted on Dukes behalf a request for 224 hours of leave without pay, which was approved on July 20, 2004. (DEX 1, Dukes Depo. at p. 88-89 & Depo. Exh. 10)<sup>2</sup>. Also, on July 14, 2004, Ms. Erickson submitted on Dukes’ behalf a request to become a leave recipient under the Voluntary Leave Transfer Program, which was approved on July 20, 2004. (DEX 1, Dukes Depo. at p. 91-92 & Depo Exh. 12).

4. On July 20, 2004, Dukes was notified that she met the requirements for participation in the Voluntary Leave Transfer Program and had been approved as a leave recipient for the period of her medical emergency. She was notified that her eligibility for participation in the program would begin on the expiration “of all your available leave” during the **period June 25-August 17, 2004**. (Emphasis in original). (DEX 1, Dukes Depo. at p. 92 & Depo Exh. 13).

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<sup>2</sup>The exhibits referenced in this case are the same ones referenced in Plaintiff’s first lawsuit, A-04-CA-0743-SS.

5. On August 30, 2004, Ms. Mildred Erickson submitted on Dukes behalf a request for advanced sick leave in the amount of 240 hours. On September 14, 2004, the request was approved for 40 hours. Following a request for reconsideration, 120 hours of advanced sick leave was approved. (DEX 1, Dukes Depo at p. 90 & Depo Exh. 11).

6. Even though Dukes was off from work for approximately five (5) months, she received advanced sick leave and donated annual leave in amounts that effectively reduced her leave without pay ("LWOP") status to the period beginning Friday, September 10, 2004 (beginning at 1:45 p.m.) through Friday, November 5, 2004. This translates into being on LWOP status for 322.75 hours or approximately 8 weeks. Moreover, **Dukes has been in a pay status since on or about Monday, November 8, 2004.** (Emphasis added). (DEX 8, James Apley Declaration at ¶ 3). As evidenced by the Declaration of Gregory Thompkins, Civilian Payroll Technician, Dukes was paid for the advanced sick leave and donated leave in the total amount of \$4789.20. The first payment was made on July 21, 2004 and the last payment was made on November 5, 2004. These payments were made at Dukes' salary rate at the time which was a GS-679-5, Step 7. (DEX 9, Thompkins Decl.).

7. On May 17, 2005, the day Dukes filed the instant lawsuit, she was not only in a pay status, but her employer gave her two (2) hours of authorized absence (administrative leave) from 8:00 to 10:00 a.m. Presumably, Dukes used this leave to file this instant lawsuit, since the Clerk's stamp indicates a filing time of 10:05 a.m. (DEX 8, James Apley Declaration at ¶ 4, & highlighted leave summary entry).

8. At deposition on October 26, 2005, Dukes testified that she is married to Mr. Tommy Dukes and they just had their 36<sup>th</sup> year anniversary on October 11<sup>th</sup>. (DEX 1, Dukes Depo. at p. 11). Additionally, Dukes testified that Mr. Dukes also works for the VA in San Antonio, Texas and

because of their geographical separation they commute on the weekends to see each other. (*Id.* at p. 15-16). Later in the deposition when the undersigned began his line of questions regarding her application to proceed *in forma pauperis* in case 04-CA-0743-SS, in response to a question regarding whether Dukes and her husband have any joint bank accounts, she volunteered that she and her husband are separated. (*Id.* at p. 108). In a followup question to clarify their separation status, Dukes contends she is contemplating divorcing her husband, but admits he does not yet know that. (*Id.* at p. 108). Despite their “separation,” Dukes admits that (1) her husband helped her with her bills and donated some of his annual leave to her<sup>3</sup>, and (2) they visited each other on the weekends during 2004, and he had last visited her the week before her October 26, 2005 deposition.<sup>4</sup>

### III. ARGUMENT

#### **Dukes Intentionally Misrepresented Her Financial Status When She Applied For In Forma Pauperis Status And, Therefore, Her Case Should Be Dismissed With Prejudice**

It is the preferred practice of the district court to grant an application to proceed *in forma pauperis* if the requirements under 28 U.S.C. § 1915(a) are met on the face of the application and dismiss under 28 U.S.C. § 1915(e) if the court later determines that the application of poverty is untrue. *See, e.g., Brown v. Schneckloth*, 421 F.2d 1402 (9<sup>th</sup> Cir. 1970); *Baker v. Hardy*, 1989 WL 32097 (N.D.N.Y. Apr. 1989). Because 1915(e)(2)(A) clearly mandates dismissal at any time when there has been a misrepresentation in a petitioner’s allegation of poverty, the issue before the Court is whether such dismissal should be with or without prejudice. *Balliviero v. Konrad*, 2002 WL 139911, \*3 (E.D.La. Jan. 31, 2002)(court dismissed plaintiff’s case without prejudice for making financial misrepresentations in his application to proceed *in forma pauperis*; court concluded

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<sup>3</sup> *See* DEX 1, Dukes Depo at pp. 104, 108-110.

<sup>4</sup> *See* DEX 1, Dukes Depo. at pp. 109-110.

dismissal without prejudice was warranted based on plaintiff's mitigating factors - health concerns and alleged misunderstanding of some of the application questions). The District Court has the discretion to determine whether the dismissal of Plaintiff's cause of action should be with or without prejudice when there has been an untrue allegation of poverty. *Id. citing Lay v. Justices of Middle District Court*, 811 F.2d 285 (5<sup>th</sup> Cir. 1987). In determining whether dismissal with prejudice was appropriate in *Lay*, the Fifth Circuit relied, in part, on the Eleventh circuit's analysis in *Camp v. Olivier*, 798 F.2d 434 (11<sup>th</sup> Cir. 1986) in which the court held that dismissal with prejudice is an "extreme sanction that should only be imposed when evidence exists of bad faith, manipulative tactics, or litigiousness." *Balliviero*, at \*3. The Fifth Circuit also analogized to the proper use of dismissal in other contexts and noted that dismissal with prejudice is to be used only in those situations where a lesser sanction would not better serve the interests of justice. *Id.* The court in *Lay* concluded that there had been no indication of extreme circumstances to warrant dismissal with prejudice when the affiant falsified a signature on a document to be presented to the Court. *Id.*

When faced with similar circumstances, other circuits have upheld district courts' dismissals with prejudice when there has been an untrue allegation of poverty to the court. In *Heath v. Walters*, 151 F.3d 1032 (7<sup>th</sup> Cir. 1998), for example, the Seventh Circuit upheld the district court's dismissal with prejudice when the plaintiff misrepresented his average annual income on his application to proceed *in forma pauperis* and explained that he had done so because "his financial situation was complicated because he [was] self-employed and because he owes taxes." The district court concluded that while plaintiff's misrepresentations were not fraudulent, they were "definitely made with the intent to mislead" and dismissed the cause of action with prejudice. *Id.* at 1032. *See also Mathis v. New York Life Ins. Co.*, 133 F.3d 546 (7<sup>th</sup> Cir. 1998)(upholding the district courts dismissal

with prejudice when plaintiff misrepresented his assets to the court by not disclosing that he owned a home because “he did not own it free and clear”).

In both cases currently pending before the Court, Dukes has knowingly given false information regarding her financial status. Dukes filed an almost identical Application to Proceed *In Forma Pauperis* on November 17, 2004<sup>5</sup>, wherein she declared under the penalty of perjury that she had been off work for five months without pay. Although it is true that Dukes was off work for approximately five-months in 2004, she did receive income during that time frame from both advanced sick leave and donated annual leave.<sup>6</sup> (DEX 1, Dukes’ Depo at p. 91-92).

In the case at bar, Dukes’ declaration under the penalty of perjury that she was off work for six months (A-05-CA-360) with absolutely no income is completely false, and the Defendant submits it was done in bad faith, with the intent to deceive the court. As discussed above, Dukes has been in a pay status since on or about Monday, November 8, 2004. Additionally, not only was she in a pay status, but her employer gave her two (2) hours of administrative leave, which she presumably used to file the false application. Moreover, Dukes was disingenuous in responding to questions regarding her marriage and alleged separation from her husband. It is noteworthy that when first asked about her marital status, Dukes testified that she and her husband had just celebrated their 36<sup>th</sup> wedding anniversary, but when confronted with questions regarding her application to proceed *in forma pauperis*, she changed her “geographical separation” from her husband to a separation pending divorce.

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<sup>5</sup> See Defendant’s MSJ filed November 15, 2005 with supporting documentation in A-04-CV-0743.

<sup>6</sup> Advanced and/or donated leave payments are paid as “out of system payments,” therefore, the amounts were sent in the form of checks, not direct deposit as her normal paycheck, and would not show on her normal leave and earnings statements.


**V. PRAYER**

Therefore, based on the foregoing, Dukes' lawsuit should be dismissed with prejudice.

Respectfully submitted,

JOHNNY SUTTON  
UNITED STATES ATTORNEY

By:

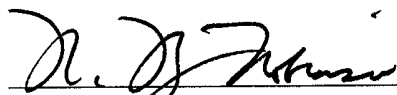
  
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ATTORNEYS FOR DEFENDANT,  
UNITED STATES OF AMERICA

**CERTIFICATE OF SERVICE**

I, R. BARRY ROBINSON, do hereby certify that a true and correct copy of the above and foregoing **Defendant United States' Motion to Dismiss, Or In The Alternative, For Summary Judgment** has been served by placing same in the United States mail, Certified Return Receipt Requested postage prepaid and regular mail, on this the 12th day of December, 2005, addressed to:

Alberta Dukes, *pro se*  
1601 Montopolis Drive, Apt. 517  
Austin, TX 78741

  
R. BARRY ROBINSON  
Assistant United States Attorney

08:53

IN THE UNITED STATES DISTRICT COURT  
FOR THE WESTERN DISTRICT OF TEXAS  
AUSTIN DIVISION

ALBERTA DUKES,

Plaintiff,

V.

R. JAMES NICHOLSON,  
Secretary of Veterans  
Affairs, Department of  
Veterans Affairs,

Defendant.

CIVIL ACTION NO.

A-04-CA-743-SS

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ORAL DEPOSITION OF

ALBERTA MARIE DUKES

OCTOBER 26, 2005

Volume 1

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ORAL DEPOSITION of ALBERTA MARIE DUKES,  
produced as a witness at the instance of the  
Defendant, and duly sworn, was taken in the  
above-styled and numbered cause on the 26th of  
October, 2005, from 9:09 to 12:27, before Rhonda  
Watson, CSR, RPR, CRR, in and for the State of Texas,  
reported by machine shorthand, at the U.S. Attorney's  
Office, 816 Congress Avenue, Suite 1000, Austin,  
Texas, pursuant to the Federal Rules of Civil  
Procedure.

WRIGHT WATSON & ASSOCIATES, L.L.C.

(800) 375-4363

(512) 474-4363

DUKES - By Mr. Robinson

09:18 1 A. Yeah.

09:18 2 Q. And then did you begin right away with the  
09:18 3 Department of Veterans Affairs?

09:18 4 A. No.

09:18 5 Q. And how long was there a break?

09:18 6 A. About ten months.

09:18 7 Q. And what did you do employment-wise during  
09:18 8 those ten months?

09:18 9 A. Nothing. My husband took care.

09:18 10 Q. Okay. Any other EEO complaints outside --

09:18 11 A. That was it.

09:18 12 Q. -- outside of Department of Veterans  
09:18 13 Affairs?

09:18 14 A. Yeah. Department of Defense. That's it.

09:18 15 Q. Okay. And are you married?

09:18 16 A. Yes.

09:18 17 Q. Okay. And your husband's name?

09:18 18 A. Tommy Dukes. T-o-m-m-y.

09:18 19 Q. And how long have you been married to -- to  
09:18 20 Tommy?

09:18 21 A. Let's see. We just had an anniversary. I  
09:19 22 was married in '69, so 36 years on the 11th of  
09:19 23 October.

09:19 24 Q. Any children?

09:19 25 A. I have two.

DUKES - By Mr. Robinson

09:22 1 Q. Do you have an estimate on when you will  
09:22 2 graduate?

09:22 3 A. Pardon me?

09:22 4 Q. Do you have an estimate on when you will  
09:23 5 graduate?

09:23 6 A. Hopefully maybe two and a half years.

09:23 7 Q. Okay.

09:23 8 A. At this pace.

09:23 9 Q. Do you have any specialty training? Any  
09:23 10 professional certificates or anything like that?

09:23 11 A. No.

09:23 12 Q. Any prior military service?

09:23 13 A. No.

09:23 14 Q. Is your husband employed?

09:23 15 A. Yes.

09:23 16 Q. And where does he work?

09:23 17 A. The VA.

09:23 18 Q. Okay. How long has he worked for the VA?

09:23 19 A. 27 years. He works at Audie Murphy in  
09:23 20 San Antonio.

09:23 21 Q. So does he commute every day?

09:23 22 A. Weekends.

09:23 23 Q. Okay.

09:23 24 A. Since I moved up here, it's been kind of  
09:23 25 hard to get back home.

DUKES - By Mr. Robinson

09:23 1 Q. So he lives in San Antonio during the week  
09:23 2 and then comes up here on weekends?

09:23 3 A. Yeah. Or I go there. He used to commute  
09:24 4 when we lived in Bastrop, but we bought a house in  
09:24 5 Bastrop, and...

09:24 6 Q. Do you still own a house in Bastrop?

09:24 7 A. No.

09:24 8 Q. Okay. And how many years have you worked  
09:24 9 for the federal government?

09:24 10 A. I started in '83, and I had ten months'  
09:24 11 break in service, so I'd say 22 years.

09:24 12 Q. And what's your date of birth?

09:24 13 A. 5-20-50.

09:24 14 Q. Okay. So that makes you 55?

09:24 15 A. Yes.

09:24 16 Q. Do you know when you plan on retiring from  
09:24 17 the federal government?

09:24 18 A. I don't know. Just kind of depends on  
09:25 19 everything, you know. But I would like to go within  
09:25 20 the next five years, maybe.

09:25 21 Q. Okay. And you plan on retiring from the  
09:25 22 Department of Veterans Affairs?

09:25 23 A. Yeah.

09:25 24 Q. Okay. And what is your current position  
09:25 25 with -- with the VA?

DUKES - By Mr. Robinson

11:30 1 (Defendant's Exhibit 10 marked.)

11:33 2 Q. (BY MR. ROBINSON) Ms. Dukes, I'm going to  
11:33 3 hand you what I've marked as Defendant's Exhibit  
11:33 4 Number 10. And it's entitled Request for Leave or  
11:33 5 Approved Absence. Do you recognize that document?

11:33 6 A. Uh-huh.

11:33 7 Q. Yes?

11:33 8 A. Yes.

11:33 9 Q. Now, this document was -- it looks like it  
11:33 10 was submitted on July the 14th, 2004. Correct?

11:33 11 A. Okay. Uh-huh.

11:33 12 Q. Yes?

11:34 13 A. By my supervisor, yes. Uh-huh.

11:34 14 Q. And your supervisor, Mildred Erickson.  
11:34 15 Correct?

11:34 16 A. Uh-huh.

11:34 17 Q. Yes?

11:34 18 A. Yes.

11:34 19 Q. Could you answer verbally?

11:34 20 A. I'm sorry.

11:34 21 Q. No problem.

11:34 22 At that time, you were requesting leave  
11:34 23 without pay from July 9, 2004, to August 17th, 2004.  
11:34 24 Correct?

11:34 25 A. July 9th to what?

DUKES - By Mr. Robinson

11:34 1 Q. August 17, 2004?

11:34 2 A. Yes. Yes.

11:34 3 Q. Okay.

11:34 4 A. Uh-huh. That's the primary care saying not  
11:34 5 to go back to work until I see a psychiatrist on  
11:34 6 August 17th. Yes.

11:34 7 Q. And that was approved?

11:34 8 A. Yes.

11:34 9 Q. And the other two documents attached to this  
11:34 10 are just supporting documentation. Correct?

11:35 11 A. Right.

11:35 12 (Defendant's Exhibit 11 marked.)

11:35 13 Q. (BY MR. ROBINSON) Ms. Dukes, let me hand  
11:35 14 you what I've marked as Defendant's Exhibit Number 11.  
11:35 15 Now, that's a memo from you, dated August 30th, 2004,  
11:35 16 requesting, again, sick leave. Correct?

11:35 17 A. No, it's not by me. I didn't write this.

11:36 18 Q. But it -- it's signed on your behalf?

11:36 19 A. On my behalf, yes. Uh-huh.

11:36 20 Q. Did you know that this was submitted on your  
11:36 21 behalf?

11:36 22 A. This is 2004? Yes, I guess so. Uh-huh.

11:36 23 Q. Yes?

11:36 24 A. Yes, I guess so. I'm kind of unsure about  
11:36 25 the -- of the dates.

DUKES - By Mr. Robinson

11:36 1 Q. Now, originally you were approved for 40  
11:36 2 hours of --

11:36 3 A. Because all this was done when I was at  
11:36 4 home. So --

11:36 5 Q. I understand.

11:36 6 A. -- I'm not sure.

11:36 7 Q. You're not sure what?

11:36 8 A. About dates and all this paperwork and all  
11:37 9 this stuff.

11:37 10 Q. But do you know that a --

11:37 11 A. See, because my signature is not on this  
11:37 12 anywhere, so I -- I don't know. I'm sure it was done  
11:37 13 while I was home.

11:37 14 Q. Okay. Were you at home in August of 2004?

11:37 15 A. Yes. Uh-huh. Yes.

11:37 16 Q. Okay. Were you aware that originally 40  
11:37 17 hours advanced sick leave was approved and  
11:37 18 subsequently it was approved for -- after  
11:37 19 reconsideration, approved for 120 hours? Are -- were  
11:37 20 you aware of that?

11:37 21 A. Yes.

11:37 22 Q. And did you, in fact, receive income as a --  
11:37 23 as a result of the advanced sick leave?

11:37 24 A. Yes. That's what I'm still paying back now.

11:37 25 (Defendant's Exhibit 12 marked.)

DUKES - By Mr. Robinson

11:39 1 Q. (BY MR. ROBINSON) I'm just going to hand  
11:39 2 you what I've marked as Defendant's Exhibit Number 12  
11:39 3 to this deposition.

11:39 4 A. Uh-huh.

11:39 5 Q. Okay. And that's a memorandum from you or  
11:39 6 on your behalf, dated July 14th, 2004, requesting  
11:39 7 voluntary leave under the Voluntary Leave Transfer  
11:39 8 Program. Correct?

11:39 9 A. Yes.

11:39 10 Q. Did you know that Ms. Erickson was  
11:39 11 submitting this request on your behalf?

11:39 12 A. I'm sure I did, yeah.

11:39 13 Q. Okay. And it -- it was approved. Correct?

11:39 14 A. Yes.

11:39 15 Q. And, in fact, as your previous testimony  
11:40 16 indicates, you did receive hours of donated annual  
11:40 17 leave. Correct?

11:40 18 A. Yes.

11:40 19 Q. And, again, when you receive donated annual  
11:40 20 leave, even though you were on a leave without pay  
11:40 21 status, that annual leave would take the place of  
11:40 22 leave without pay status. Correct?

11:40 23 A. Yes.

11:40 24 Q. It would substitute and you would get  
11:40 25 income. Correct?

DUKES - By Mr. Robinson

11:40 1 A. Yes.

11:40 2 (Defendant's Exhibit 13 marked.)

11:40 3 Q. (BY MR. ROBINSON) I hand you what I've  
11:41 4 marked as Defendant's Exhibit Number 13. And,  
11:41 5 Ms. Dukes, that's a memorandum from Jim Basso -- or  
11:41 6 James Basso to you, indicating that you qualify for  
11:41 7 the Voluntary Leave Transfer Program. Correct?

11:41 8 A. Yes. Uh-huh.

11:41 9 Q. Okay.

11:41 10 A. I don't remember this letter, but that did  
11:41 11 happen.

11:41 12 Q. Okay. Back in 2004, did either your son or  
11:42 13 daughter live with you?

11:42 14 A. No.

11:42 15 Q. Okay. At any time in 2005, did either your  
11:43 16 daughter or son live with you?

11:43 17 A. No. Grandbabies.

11:43 18 Q. Okay. In -- in 2005?

11:43 19 A. 2004, part of '05.

11:43 20 Q. Do you have any grandchildren live with  
11:43 21 you -- that lived with you?

11:43 22 A. Yeah. My two grandchildren.

11:43 23 Q. Your two grandchildren?

11:43 24 A. Yeah. From probably 2000 -- 2002 or 2000 --  
11:43 25 maybe 2001 to the present.

*DUKES - By Mr. Robinson*

12:00 1 Q. Okay.

12:00 2 A. Then Joseph and Shirley Scott, I owe them.  
12:00 3 Those are friends of mine from home.

12:00 4 Q. 2100?

12:00 5 A. Yeah. Let's see. That's it. Other than  
12:00 6 that, my husband paid my bills.

12:01 7 Q. So you had to borrow \$4400 from friends?

12:01 8 A. Oh, probably more than that. I'm trying to  
12:01 9 think who else I borrowed from. I don't know. About  
12:01 10 that, around that.

12:01 11 Q. About that?

12:01 12 A. Uh-huh.

12:01 13 Q. Okay. Have you paid Mr. Brown or Joseph and  
12:01 14 Shirley Scott any of their money back?

12:01 15 A. Mr. Brown, I paid him 300 back already.

12:01 16 Q. And when did you pay him 300?

12:01 17 A. A little at a time.

12:01 18 Q. I'm sorry?

12:01 19 A. A little at a time. A hundred here, 200  
12:01 20 there, like that. That's what I -- the way I do them  
12:01 21 all. And --

12:01 22 Q. And when did you pay -- say you paid them --  
12:01 23 so you paid them back in 100 one time, and you  
12:01 24 finished off with 200 --

12:01 25 A. 200 another time. So I owe them --

DUKES - By Mr. Robinson

12:05 1 Q. Into the savings account?

12:05 2 A. Uh-huh.

12:05 3 Q. Yes?

12:05 4 A. Yes.

12:05 5 Q. So when you pay bills, how do you get money  
12:05 6 from your savings account to your --

12:05 7 A. I just withdraw the money and pay the bills.

12:05 8 Q. Okay. Money order? Cash?

12:05 9 A. Money order, cash.

12:05 10 Q. Okay. Now, you're married. Do you -- do  
12:06 11 you and your husband have any type of a joint account?

12:06 12 A. No.

12:06 13 Q. No joint checking or savings account?

12:06 14 A. No. We're separated at this point. I  
12:06 15 thought I might mention that.

12:06 16 Q. Well, before, I knew you were geographically  
12:06 17 separated, at least until weekends, from -- so when  
12:06 18 you mean separated, you're contemplating divorce?

12:06 19 A. We're contemplating. I am.

12:06 20 Q. Does your husband know that?

12:06 21 A. Not yet.

12:06 22 Q. Okay. And does your contemplation -- do  
12:07 23 your EEO cases have anything to do with your decision  
12:07 24 that you might divorce your husband?

12:07 25 A. I think so.

*DUKES - By Mr. Robinson*

12:07 1 Q. In what way?

12:07 2 A. Well, the support. I didn't feel I had as  
12:07 3 much support as I could -- I should have received from  
12:07 4 him financially.

12:07 5 Q. Okay.

12:07 6 A. Which caused me to go through all this that  
12:07 7 I'm going through now, you know, eviction notices and  
12:07 8 all that kind of stuff. I think he could have done  
12:07 9 much more, you know.

12:07 10 Q. Did he provide any support to you in 2004?

12:07 11 A. Yeah.

12:07 12 Q. And what support did he provide?

12:07 13 A. He donated leave to me when I was out.  
12:07 14 He -- he came down and paid my, you know, utilities  
12:08 15 and all those little bills like that.

12:08 16 Q. When did you two become officially  
12:08 17 separated?

12:08 18 A. I don't know how -- how to even do that  
12:08 19 because we're already geographically separated in the  
12:08 20 first place. So we're separated even when we were  
12:08 21 together. So...

12:08 22 Q. I understand that.

12:08 23 A. Uh-huh.

12:08 24 Q. Do you go -- still go home?

12:08 25 A. No, I don't.

DUKES - By Mr. Robinson

12:08 1 Q. When is the last time --

12:08 2 A. And I haven't gone home, I guess, for about  
12:08 3 six months, I guess. But he was here last week.

12:08 4 Q. Okay. So at least 2004, that entire year,  
12:08 5 you were seeing each other at least on the weekends?

12:08 6 A. Yeah.

12:08 7 Q. Yes? Okay.

12:08 8 A. Uh-huh.

12:09 9 Q. And in 2004, you said he paid some  
12:09 10 utilities. He gave you some donated leave. What  
12:09 11 other financial support did he provide you?

12:09 12 A. That's pretty much it. Just that kind of  
12:09 13 money. Pay bills, some change in my pocket, whatever,  
12:09 14 which, of course, went to bills.

12:09 15 Q. Okay. You've already listed some of the  
12:09 16 bills, but in -- back in 2004, what bills did you  
12:09 17 have? Let's start with --

12:09 18 A. Just the basic home bills --

12:09 19 Q. Did you rent -- did you rent or buy?

12:09 20 A. I was renting.

12:09 21 Q. Renting? And how much was rent?

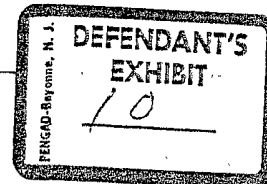
12:09 22 A. 489. That's for the apartment.

12:09 23 Q. Okay.

12:09 24 A. And then I -- utility bills, feeding  
12:09 25 myself --

## REQUEST FOR LEAVE OR APPROVED ABSENCE

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                       |  |                                                             |  |                       |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------|--|-------------------------------------------------------------|--|-----------------------|--|
| 1. NAME (Last, First, Middle Initial)<br><i>Dukes, Alberta M.</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                       |  | 2. EMPLOYEE OR SOCIAL SECURITY NUMBER<br><i>465-86-7025</i> |  |                       |  |
| 3. ORGANIZATION<br><i>H.S.A.</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                       |  |                                                             |  |                       |  |
| 4. TYPE OF LEAVE/ABSENCE<br>(Check appropriate box(es) below.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | DATE<br>From: To:     |  | TIME<br>From: To:                                           |  | TOTAL<br>HOURS        |  |
| <input type="checkbox"/> Accrued Annual Leave                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                       |  |                                                             |  |                       |  |
| <input type="checkbox"/> Restored Annual Leave                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                       |  |                                                             |  |                       |  |
| <input type="checkbox"/> Advanced Annual Leave                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                       |  |                                                             |  |                       |  |
| <input type="checkbox"/> Accrued Sick Leave                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                       |  |                                                             |  |                       |  |
| <input type="checkbox"/> Advanced Sick Leave                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                       |  |                                                             |  |                       |  |
| Purpose: <input type="checkbox"/> Medical/dental/optical examination of requesting employee <input type="checkbox"/> Other<br><input type="checkbox"/> Care of family member/bereavement, including medical/dental/optical examination of family member                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                       |  |                                                             |  |                       |  |
| <input type="checkbox"/> Compensatory Time Off                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                       |  |                                                             |  |                       |  |
| <input type="checkbox"/> Other Paid Absence<br>(Specify in Remarks)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                       |  |                                                             |  |                       |  |
| <input checked="" type="checkbox"/> Leave Without Pay                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | <i>7/9/04 8/17/04</i> |  | <i>8:00 am 4:30 pm</i>                                      |  | <i>224</i>            |  |
| 5. FAMILY AND MEDICAL LEAVE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                       |  |                                                             |  |                       |  |
| If annual leave, sick leave, or leave without pay will be used under the Family and Medical Leave Act of 1993, please provide the following information:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                       |  |                                                             |  |                       |  |
| <input type="checkbox"/> I hereby invoke my entitlement to Family and Medical Leave for:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                       |  |                                                             |  |                       |  |
| <input type="checkbox"/> Birth/Adoption/Foster Care                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                       |  |                                                             |  |                       |  |
| <input type="checkbox"/> Serious Health Condition of Spouse, Son, Daughter, or Parent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                       |  |                                                             |  |                       |  |
| <input type="checkbox"/> Serious Health Condition of Self                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                       |  |                                                             |  |                       |  |
| Contact your supervisor and/or your personnel office to obtain additional information about your entitlements and responsibilities under the Family and Medical Leave Act of 1993.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                       |  |                                                             |  |                       |  |
| 6. REMARKS<br><i>in lieu of SL</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                       |  |                                                             |  |                       |  |
| 7. CERTIFICATION: I hereby request leave/approved absence from duty as indicated above and certify that such leave/absence is requested for the purpose(s) indicated. I understand that I must comply with my employing agency's procedures for requesting leave/approved absence (and provide additional documentation, including medical certification, if required) and that falsification of information on this form may be grounds for disciplinary action, including removal.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                       |  |                                                             |  |                       |  |
| EMPLOYEE SIGNATURE <i>for Mildred L. Erickson</i><br><i>Alberta M. Dukes</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                       |  |                                                             |  | DATE <i>7/14/2004</i> |  |
| 8. OFFICIAL ACTION ON REQUEST: <input checked="" type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED<br>(If disapproved, give reason. If annual leave, initiate action to reschedule.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                       |  |                                                             |  |                       |  |
| SIGNATURE <i>James Basso</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                       |  |                                                             |  | DATE <i>7-20-04</i>   |  |
| Human Resources Officer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                       |  |                                                             |  |                       |  |
| PRIVACY ACT STATEMENT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                       |  |                                                             |  |                       |  |
| Section 6311 of title 5, United States Code, authorizes collection of this information. The primary use of this information is by management and your payroll office to approve and record your use of leave. Additional disclosures of the information may be: To the Department of Labor when processing a claim for compensation regarding a job connected injury or illness; to a State unemployment compensation office regarding a claim; to Federal Life Insurance or Health Benefits carriers regarding a claim; to a Federal, State, or local law enforcement agency when your agency becomes aware of a violation or possible violation of civil or criminal law; to a Federal agency when conducting an investigation for employment or security reasons; to the Office of Personnel Management or the General Accounting Office when the information is required for evaluation of leave administration; or the General Services Administration in connection with its responsibilities for records management. |  |                       |  |                                                             |  |                       |  |
| Where the employee identification number is your Social Security Number, collection of this information is authorized by Executive Order 9397. Furnishing the information on this form, including your Social Security Number, is voluntary, but failure to do so may result in disapproval of this request.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                       |  |                                                             |  |                       |  |
| If your agency uses the information furnished on this form for purposes other than those indicated above, it may provide you with an additional statement reflecting those purposes.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                       |  |                                                             |  |                       |  |



# FAMILY PRACTICE CLINIC

HAROLD D. LEWIS, D.O., P.A.

1901 West William Cannon #123  
Austin, Texas 78745  
(512) 444-2661  
(512) 444-2720 - Fax



Date : 6-24-04

Patient Name : Alberta Dukes

Date of Birth : \_\_\_\_\_

Specialist : Mental Health

( ) 800-410-5999

Reason For

Referral: eval / treat anx, dep.

Authorization Number (if required) : N/A

Beginning Date : \_\_\_\_\_

Ending Date : \_\_\_\_\_

Number of Visits : \_\_\_\_\_

PLEASE CALL SPECIALIST OFFICE FOR AN APPOINTMENT

DR says not to return to work until I see  
another doctor for treatment of panic disorder,  
anxiety and depression. The appointment won't be  
until 8/17/04 (attached)

FAMILY PRACTICE CLINIC

HAROLD D. LEWIS, D.O., P.A.  
JANNA S. NICHOLS, F.N.P.-C.  
1901 WEST WILLIAM CANNON #123  
AUSTIN, TEXAS 78745  
(512) 444-2661  
(512) 444-2720 - FAX



June 25, 2004

RE: ALBERTA DUKES  
DOB: 05-20-50  
SSN # 465-86-7025

To Whom It May Concern,

I am the primary care doctor for Mrs. Alberta Dukes. I recently evaluated and have recommended that she stay off work until she gets an evaluation with a physcologist. At this time her appointment has been set for August 17, 2004 with the physcologist that is in her network. Thank you for your attention to this matter.

Harold D. Lewis, D.O., P.A.

HDL/ddm  
06250401

# DEPARTMENT OF Veterans Affairs

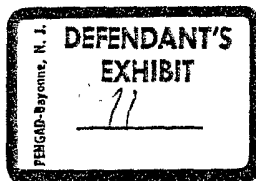
## MEMORANDUM

Date: August 30, 2004

From: Alberta M. Dukes (004C3A A)

Subj: Advanced Sick Leave

To: Deputy Director (00)  
THRU: Acting Chief, Patient Financial and Support Service (004C)  
Human Resource Management Service (05D)



1. I hereby request approval for advanced sick leave for the period from August 30<sup>th</sup> 2004 to September 10, 2004, a total of 240 hours. Advanced sick leave is requested because of a medical condition that required me to be absent from work due to illness and doctor appointments. I have exhausted all of my sick leave. I do not have enough accrued sick leave to cover the entire medical absence.

2. I understand that an employee may not be advanced sick leave if it is known at the time that they will not return to duty. I hereby certify that I intend to return to duty. In the event that I cannot return to employment, or if employment is terminated by resignation, retirement, removal, or otherwise before the advanced leave is repaid. I understand that at the time of separation, any advanced annual leave subject to refund, and unliquidated by earned credit or otherwise, will be collected from me in cash or by payroll deduction for the value of the leave involved.

*Mildred L. Erickson, Supervisor H.S.A.*  
for Alberta M. Dukes

Recommend Approval Disapproval

*Recommend no more than 40 hrs. advance sick leave due to past history & medical condition @ this time.*

Elaine Kunkel *Elaine Kunkel*  
Chief, Health Services Administration

Recommend Approval Disapproval

*concur with Ms. Kunkel*  
*Wayne Welge*  
Wayne Welge  
Acting Chief, PF&SS

Recommend Approval Disapproval

*of 40 only based on leave was recommended by sec*  
*James Basso & each other*  
James Basso  
Human Resource Officer

RECONSIDERATION OF PREVIOUS DECISION AS BELOW:

*Reconsidered & Rec 120*  
*SEP 22 2004*

*James Basso, Human Resources Officer*

Approval/Disapproval

*concur w/05 for 40 hrs.*  
*SEP 14 2004*  
Jeff Milligan  
Deputy Director

APPROVED/DISAPPROVED:

*concur w/05 for 120 hrs.*  
*SEP 22 2004*  
Jeff Milligan, Acting Deputy Director

Department of  
Veterans Affairs

Memorandum

Date: July 14, 2004

From: Alberta M. Dukes

Subj: Voluntary Leave Transfer Program

To: Chief, Human Resources Management Service (05)  
Thru: Chief, Patient Financial and Support Services (004C)  
Chief, Health Services Administration (004C3)

2004 JUL 20  
(05D)

1. I, Alberta M. Dukes, Clerk, Health Services Administration, am applying to become a leave recipient under the Voluntary Leave Transfer Program.
2. Because of the condition of my health, I have been instructed by my doctor to stay off work until I receive an evaluation of my condition, which is scheduled for August 17, 2004. Leave needed from 7/9/2004 to unknown.
3. If I am approved for this program, I understand that it will be my responsibility to identify employees who may wish to donate some annual leave on my behalf, which I have done.
4. Thank you for considering this application.

*for* *Mildred L. Erickson*  
/s/ Alberta M. Dukes

Attachments: (1) SF-71  
(2) Doctor's note

RECOMMEND APPROVAL / ~~DISAPPROVAL~~:

*Elaine Kunkel*

Elaine Kunkel  
Chief, Health Services Administration  
Service

RECOMMEND APPROVAL / ~~DISAPPROVAL~~:

*Wayne Welge*

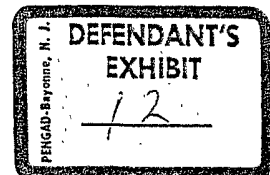
Wayne Welge  
Acting Chief, Patient Financial and Support  
Service

RECOMMEND APPROVAL / ~~DISAPPROVAL~~:

*James Basso*

James Basso  
Human Resources Management Officer

7/20/04

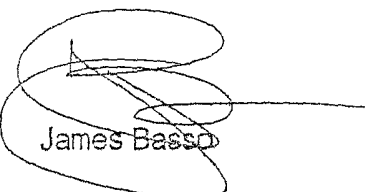


Department of  
Veterans Affairs

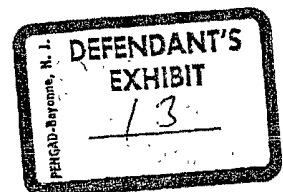
05F1  
**Memorandum**

Date: July 20, 2004  
From: Human Resources Officer (05)  
Subj: Voluntary Leave Transfer Program  
To: Alberta M. Dukes (004C3-Austin OPC)

1. This is to inform you that you meet the requirements for participation in the Voluntary Leave Transfer Program and have been approved as a leave recipient for the period of your medical emergency. Your eligibility for participation in the program begins upon the expiration of all your available leave during the period **June 25-August 17, 2004**.
2. At your discretion, you may inform other employees that they may request the transfer of their annual leave to your account to be used in connection with your medical emergency. If there are insufficient donations of leave from VA employees, leave transfers may be accepted from employees at other Federal agencies. All donations are voluntary, and the minimum leave transfer is 4 hours or, for certain Title 38 employees, 1 day. Employees you supervise may not make leave donations to you.
3. If you have questions regarding this program, please contact Bettie Linscomb, Ext. 1378, Human Resources Management Service (HRMS), Mail Code 05.
4. We sincerely hope this program will be of assistance to you during your medical emergency.

  
James Basso

cc:  
Patient Financial & Support Services (004C-T)  
Payroll (04)  
→ Processing & Records (05F1)  
AFGE (Temple)



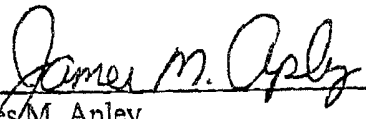


4. At attachment one to this Declaration is a true and accurate copy of Ms. Dukes' Leave Used Summary for the period of January 11, 2004 (pay period one) to October 18, 2005. The following totals are reflected at the end of the summary and show the following:

- a. Authorized Absence: 23.50 hours
- b. Annual Leave: 535.75 hours
- c. Compensatory Time/Credit Hours: 5.00 hours
- d. Compensatory: 5 hours
- e. Sick leave: 191.50
- f. Without pay: 322.75

I declare under penalty of perjury that the foregoing is true and correct.

EXECUTED ON this 15 day of November, 2005.

  
\_\_\_\_\_  
James M. Apley  
Employee/Labor Relations Specialist

□E□(s10H

LEAVE USED SUMMARY  
 from: JAN 11, 2004 to: OCT 18, 2005  
 for: DUKES,ALBERTA M - T&L: 652

DATE: Oct 18, 2005

| PP | DATE          | TYPE               | FROM   | TO     | LENGTH     |
|----|---------------|--------------------|--------|--------|------------|
| 01 | Tue 20-Jan-04 | Annual Leave       | 01:30P | 04:30P | 3.00 Hours |
| 02 | Tue 27-Jan-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 28-Jan-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
| 03 | Tue 10-Feb-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
| 04 | Tue 24-Feb-04 | Annual Leave       | 08:00A | 08:30A | 0.50 Hours |
|    | Fri 27-Feb-04 | Sick Leave         | 12:30P | 04:30P | 4.00 Hours |
|    | Tue 2-Mar-04  | Sick Leave         | 02:30P | 04:30P | 2.00 Hours |
| 05 | Mon 8-Mar-04  | Sick Leave         | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 17-Mar-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 18-Mar-04 | Sick Leave         | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 19-Mar-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
| 06 | Mon 29-Mar-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 30-Mar-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
| 07 | Mon 5-Apr-04  | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 6-Apr-04  | Annual Leave       | 01:30P | 04:30P | 3.00 Hours |
|    | Wed 14-Apr-04 | Annual Leave       | 02:30P | 04:30P | 2.00 Hours |
|    | Thu 15-Apr-04 | Authorized Absence | 08:00A | 10:00A | 2.00 Hours |
|    |               | Annual Leave       | 10:00A | NOON   | 2.00 Hours |
|    |               | Annual Leave       | 12:30P | 04:30P | 4.00 Hours |
|    | Fri 16-Apr-04 | Authorized Absence | 08:00A | 10:00A | 2.00 Hours |
|    |               | Annual Leave       | 10:00A | NOON   | 2.00 Hours |
|    |               | Annual Leave       | 12:30P | 04:30P | 4.00 Hours |
| 08 | Mon 19-Apr-04 | Authorized Absence | 08:00A | NOON   | 4.00 Hours |
|    |               | Annual Leave       | 12:30P | 04:30P | 4.00 Hours |
|    | Tue 20-Apr-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 30-Apr-04 | Sick Leave         | 02:00P | 04:30P | 2.50 Hours |
| 09 | Wed 5-May-04  | Authorized Absence | 12:30P | 02:30P | 2.00 Hours |
|    |               | Annual Leave       | 02:30P | 04:30P | 2.00 Hours |
|    | Wed 12-May-04 | Sick Leave         | 08:00A | 04:30P | 8.00 Hours |
| 11 | Thu 3-Jun-04  | Sick Leave         | 10:00A | 11:00A | 1.00 Hour  |
|    | Fri 4-Jun-04  | Annual Leave       | 02:30P | 04:30P | 2.00 Hours |
|    | Mon 7-Jun-04  | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 8-Jun-04  | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 9-Jun-04  | Authorized Absence | 08:00A | 10:00A | 2.00 Hours |
|    |               | Annual Leave       | 10:00A | NOON   | 2.00 Hours |
|    |               | Annual Leave       | 12:30P | 02:00P | 1.50 Hours |
|    |               | Sick Leave         | 02:00P | 04:30P | 2.50 Hours |
|    | Thu 10-Jun-04 | Sick Leave         | 08:00A | 04:30P | 8.00 Hours |
| 12 | Tue 15-Jun-04 | Annual Leave       | 08:00A | 08:30A | 0.50 Hours |
|    | Thu 24-Jun-04 | Sick Leave         | 08:00A | NOON   | 4.00 Hours |
|    |               | Sick Leave         | 12:30P | 03:00P | 2.50 Hours |
|    |               | Annual Leave       | 03:00P | 04:30P | 1.50 Hours |
|    | Fri 25-Jun-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
| 13 | Mon 28-Jun-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 29-Jun-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 30-Jun-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 1-Jul-04  | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 2-Jul-04  | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 6-Jul-04  | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |

DHCP PAID REPORT L003

VA TIME &amp; ATTENDANCE SYSTEM

LEAVE USED SUMMARY  
 from: JAN 11, 2004 to: OCT 18, 2005  
 for: DUKES, ALBERTA M - T&L: 652

DATE: Oct 18, 2005

| PP | DATE          | TYPE         | FROM   | TO     | LENGTH     |
|----|---------------|--------------|--------|--------|------------|
| 13 | Wed 7-Jul-04  | Annual Leave | 08:00A | NOON   | 4.00 Hours |
|    |               | Annual Leave | 12:30P | 04:15P | 3.75 Hours |
|    |               | Sick Leave   | 04:15P | 04:30P | 0.25 Hours |
|    | Thu 8-Jul-04  | Sick Leave   | 08:00A | 11:45A | 3.75 Hours |
|    |               | Sick Leave   | 11:45A | 12:45P | 1.00 Hour  |
|    |               | Annual Leave | 01:15P | 04:30P | 3.25 Hours |
|    | Fri 9-Jul-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
| 14 | Mon 12-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 13-Jul-04 | Annual Leave | 08:00A | 01:00P | 5.00 Hours |
|    |               | Annual Leave | 01:30P | 04:30P | 3.00 Hours |
|    | Wed 14-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 15-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 16-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Mon 19-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 20-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 21-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 22-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 23-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
| 15 | Mon 26-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 27-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 28-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 29-Jul-04 | Annual Leave | 08:00A | 01:00P | 5.00 Hours |
|    |               | Annual Leave | 01:30P | 04:30P | 3.00 Hours |
|    | Fri 30-Jul-04 | Annual Leave | 08:00A | 09:00A | 1.00 Hour  |
|    |               | Annual Leave | 09:00A | NOON   | 3.00 Hours |
|    |               | Annual Leave | 12:30P | 04:30P | 4.00 Hours |
|    | Mon 2-Aug-04  | Annual Leave | 08:00A | 09:00A | 1.00 Hour  |
|    |               | Annual Leave | 09:00A | NOON   | 3.00 Hours |
|    |               | Annual Leave | 12:30P | 04:30P | 4.00 Hours |
|    | Tue 3-Aug-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 4-Aug-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 5-Aug-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 6-Aug-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
| 16 | Mon 9-Aug-04  | Annual Leave | 08:00A | 12:45P | 4.75 Hours |
|    |               | Sick Leave   | 01:15P | 04:30P | 3.25 Hours |
|    | Tue 10-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 11-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 12-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 13-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Mon 16-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 17-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 18-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 19-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 20-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
| 17 | Mon 23-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 24-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 25-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 26-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 27-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |

DHCP PAID REPORT L003

VA TIME &amp; ATTENDANCE SYSTEM

LEAVE USED SUMMARY  
 from: JAN 11, 2004 to: OCT 18, 2005  
 for: DUKES,ALBERTA M - T&L: 652

DATE: Oct 18, 2005

| PP | DATE          | TYPE         | FROM   | TO     | LENGTH     |
|----|---------------|--------------|--------|--------|------------|
| 17 | Mon 30-Aug-04 | Sick Leave   | 08:00A | 12:45P | 4.75 Hours |
|    |               | Sick Leave   | 01:15P | 04:30P | 3.25 Hours |
|    | Tue 31-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 1-Sep-04  | Sick Leave   | 08:00A | 11:00A | 3.00 Hours |
|    |               | Sick Leave   | 11:30A | 01:15P | 1.75 Hours |
|    |               | Annual Leave | 01:15P | 04:30P | 3.25 Hours |
|    | Thu 2-Sep-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 3-Sep-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
| 18 | Mon 6-Sep-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 7-Sep-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 8-Sep-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 9-Sep-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 10-Sep-04 | Annual Leave | 08:00A | 11:00A | 3.00 Hours |
|    |               | Annual Leave | 11:30A | 01:45P | 2.25 Hours |
|    |               | Without Pay  | 01:45P | 04:30P | 2.75 Hours |
|    | Mon 13-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 14-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 15-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 16-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 17-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
| 19 | Mon 20-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 21-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 22-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 23-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 24-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Mon 27-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 28-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 29-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 30-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 1-Oct-04  | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
| 20 | Mon 4-Oct-04  | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 5-Oct-04  | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 6-Oct-04  | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 7-Oct-04  | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 8-Oct-04  | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Mon 11-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 12-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 13-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 14-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 15-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
| 21 | Mon 18-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 19-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 20-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 21-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 22-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Mon 25-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 26-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 27-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 28-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |

DHCP PAID REPORT L003

VA TIME & ATTENDANCE SYSTEM

LEAVE USED SUMMARY  
 from: JAN 11, 2004 to: OCT 18, 2005  
 for: DUKES,ALBERTA M - T&L: 652

DATE: Oct 18, 2005

| PP      | DATE          | TYPE               | FROM               | TO     | LENGTH       |
|---------|---------------|--------------------|--------------------|--------|--------------|
| 21      | Fri 29-Oct-04 | Without Pay        | 08:00A             | 04:30P | 8.00 Hours   |
| 22      | Mon 1-Nov-04  | Without Pay        | 08:00A             | 04:30P | 8.00 Hours   |
|         | Tue 2-Nov-04  | Without Pay        | 08:00A             | 04:30P | 8.00 Hours   |
|         | Wed 3-Nov-04  | Without Pay        | 08:00A             | 04:30P | 8.00 Hours   |
|         | Thu 4-Nov-04  | Without Pay        | 08:00A             | 04:30P | 8.00 Hours   |
|         | Fri 5-Nov-04  | Without Pay        | 08:00A             | 04:30P | 8.00 Hours   |
| 23      | Tue 16-Nov-04 | Annual Leave       | 03:30P             | 04:30P | 1.00 Hour    |
|         | Wed 24-Nov-04 | Annual Leave       | 02:30P             | 04:30P | 2.00 Hours   |
| 24      | Wed 8-Dec-04  | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
|         | Fri 10-Dec-04 | Annual Leave       | 08:00A             | 09:00A | 1.00 Hour    |
| 26      | Wed 5-Jan-05  | Authorized Absence | 02:30P             | 04:30P | 2.00 Hours   |
|         | Thu 6-Jan-05  | Annual Leave       | 08:00A             | 09:30A | 1.50 Hours   |
| 01      | Tue 18-Jan-05 | Annual Leave       | 08:00A             | 10:30A | 2.50 Hours   |
| 02      | Thu 27-Jan-05 | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
|         | Fri 28-Jan-05 | Annual Leave       | 11:30A             | 04:30P | 5.00 Hours   |
|         | Mon 31-Jan-05 | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
| 03      | Tue 8-Feb-05  | Annual Leave       | 08:00A             | 09:30A | 1.50 Hours   |
| 04      | Tue 22-Feb-05 | Annual Leave       | 08:00A             | 09:30A | 1.50 Hours   |
|         | Thu 3-Mar-05  | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
| 05      | Fri 11-Mar-05 | Authorized Absence | 02:30P             | 04:30P | 2.00 Hours   |
| 06      | Mon 28-Mar-05 | Annual Leave       | 08:00A             | 09:00A | 1.00 Hour    |
| 07      | Wed 6-Apr-05  | Annual Leave       | 08:00A             | 09:00A | 1.00 Hour    |
|         | Wed 13-Apr-05 | Annual Leave       | 10:30A             | NOON   | 1.50 Hours   |
| 08      | Mon 18-Apr-05 | Annual Leave       | 10:30A             | NOON   | 1.50 Hours   |
|         | Tue 19-Apr-05 | Annual Leave       | 01:30P             | 04:30P | 3.00 Hours   |
|         | Wed 20-Apr-05 | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
|         | Thu 21-Apr-05 | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
|         | Fri 22-Apr-05 | Annual Leave       | 11:00A             | 04:30P | 5.50 Hours   |
| 09      | Wed 11-May-05 | Annual Leave       | 03:30P             | 04:30P | 1.00 Hour    |
| 10      | Tue 17-May-05 | Authorized Absence | 08:00A             | 10:00A | 2.00 Hours   |
| 11      | Mon 6-Jun-05  | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
| 12      | Mon 13-Jun-05 | Authorized Absence | 08:00A             | 10:00A | 2.00 Hours   |
|         |               | Annual Leave       | 10:00A             | NOON   | 2.00 Hours   |
|         |               | Annual Leave       | 12:30P             | 04:30P | 4.00 Hours   |
|         | Mon 20-Jun-05 | Annual Leave       | 08:00A             | 09:00A | 1.00 Hour    |
| 13      | Wed 29-Jun-05 | Authorized Absence | 01:00P             | 02:30P | 1.50 Hours   |
|         |               | Annual Leave       | 02:30P             | 04:30P | 2.00 Hours   |
| 14      | Mon 18-Jul-05 | Annual Leave       | 08:00A             | NOON   | 4.00 Hours   |
|         |               | Annual Leave       | 12:30P             | 02:30P | 2.00 Hours   |
|         |               | Authorized Absence | 02:30P             | 04:30P | 2.00 Hours   |
| 16      | Mon 15-Aug-05 | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
| 17      | Mon 22-Aug-05 | Compensatory       | 08:00A             | 11:30A | 3.50 Hours   |
|         |               | Annual Leave       | NOON               | 04:30P | 4.50 Hours   |
| 20      | Wed 5-Oct-05  | Annual Leave       | 01:00P             | 04:30P | 3.50 Hours   |
|         | Fri 14-Oct-05 | Compensatory       | 01:30P             | 03:00P | 1.50 Hours   |
| TOTALS: |               |                    | Authorized Absence |        | 23.50 Hours  |
|         |               |                    | Annual Leave       |        | 535.75 Hours |
|         |               |                    | CompTime/CreditHrs |        | 5.00 Hours   |

DHCP PAID REPORT L003

VA TIME &amp; ATTENDANCE SYSTEM



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LEAVE USED SUMMARY  
 from: JAN 11, 2004 to: OCT 18, 2005  
 for: DUKES, ALBERTA M - T&L: 652

DATE: Oct 18, 2005

| PP | DATE          | TYPE               | FROM   | TO     | LENGTH     |
|----|---------------|--------------------|--------|--------|------------|
| 01 | Tue 20-Jan-04 | Annual Leave       | 01:30P | 04:30P | 3.00 Hours |
| 02 | Tue 27-Jan-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 28-Jan-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
| 03 | Tue 10-Feb-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
| 04 | Tue 24-Feb-04 | Annual Leave       | 08:00A | 08:30A | 0.50 Hours |
|    | Fri 27-Feb-04 | Sick Leave         | 12:30P | 04:30P | 4.00 Hours |
|    | Tue 2-Mar-04  | Sick Leave         | 02:30P | 04:30P | 2.00 Hours |
| 05 | Mon 8-Mar-04  | Sick Leave         | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 17-Mar-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 18-Mar-04 | Sick Leave         | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 19-Mar-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
| 06 | Mon 29-Mar-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 30-Mar-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
| 07 | Mon 5-Apr-04  | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 6-Apr-04  | Annual Leave       | 01:30P | 04:30P | 3.00 Hours |
|    | Wed 14-Apr-04 | Annual Leave       | 02:30P | 04:30P | 2.00 Hours |
|    | Thu 15-Apr-04 | Authorized Absence | 08:00A | 10:00A | 2.00 Hours |
|    |               | Annual Leave       | 10:00A | NOON   | 2.00 Hours |
|    |               | Annual Leave       | 12:30P | 04:30P | 4.00 Hours |
|    | Fri 16-Apr-04 | Authorized Absence | 08:00A | 10:00A | 2.00 Hours |
|    |               | Annual Leave       | 10:00A | NOON   | 2.00 Hours |
|    |               | Annual Leave       | 12:30P | 04:30P | 4.00 Hours |
| 08 | Mon 19-Apr-04 | Authorized Absence | 08:00A | NOON   | 4.00 Hours |
|    |               | Annual Leave       | 12:30P | 04:30P | 4.00 Hours |
|    | Tue 20-Apr-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 30-Apr-04 | Sick Leave         | 02:00P | 04:30P | 2.50 Hours |
| 09 | Wed 5-May-04  | Authorized Absence | 12:30P | 02:30P | 2.00 Hours |
|    |               | Annual Leave       | 02:30P | 04:30P | 2.00 Hours |
|    | Wed 12-May-04 | Sick Leave         | 08:00A | 04:30P | 8.00 Hours |
| 11 | Thu 3-Jun-04  | Sick Leave         | 10:00A | 11:00A | 1.00 Hour  |
|    | Fri 4-Jun-04  | Annual Leave       | 02:30P | 04:30P | 2.00 Hours |
|    | Mon 7-Jun-04  | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 8-Jun-04  | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 9-Jun-04  | Authorized Absence | 08:00A | 10:00A | 2.00 Hours |
|    |               | Annual Leave       | 10:00A | NOON   | 2.00 Hours |
|    |               | Annual Leave       | 12:30P | 02:00P | 1.50 Hours |
|    |               | Sick Leave         | 02:00P | 04:30P | 2.50 Hours |
|    | Thu 10-Jun-04 | Sick Leave         | 08:00A | 04:30P | 8.00 Hours |
| 12 | Tue 15-Jun-04 | Annual Leave       | 08:00A | 08:30A | 0.50 Hours |
|    | Thu 24-Jun-04 | Sick Leave         | 08:00A | NOON   | 4.00 Hours |
|    |               | Sick Leave         | 12:30P | 03:00P | 2.50 Hours |
|    |               | Annual Leave       | 03:00P | 04:30P | 1.50 Hours |
|    | Fri 25-Jun-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
| 13 | Mon 28-Jun-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 29-Jun-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 30-Jun-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 1-Jul-04  | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 2-Jul-04  | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 6-Jul-04  | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |

DHCP PAID REPORT L003

VA TIME &amp; ATTENDANCE SYSTEM

LEAVE USED SUMMARY  
 from: JAN 11, 2004 to: OCT 18, 2005  
 for: DUKES, ALBERTA M - T&L: 652

DATE: Oct 18, 2005

| PP | DATE          | TYPE         | FROM   | TO     | LENGTH     |
|----|---------------|--------------|--------|--------|------------|
| 13 | Wed 7-Jul-04  | Annual Leave | 08:00A | NOON   | 4.00 Hours |
|    |               | Annual Leave | 12:30P | 04:15P | 3.75 Hours |
|    |               | Sick Leave   | 04:15P | 04:30P | 0.25 Hours |
|    | Thu 8-Jul-04  | Sick Leave   | 08:00A | 11:45A | 3.75 Hours |
|    |               | Sick Leave   | 11:45A | 12:45P | 1.00 Hour  |
| 14 |               | Annual Leave | 01:15P | 04:30P | 3.25 Hours |
|    | Fri 9-Jul-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Mon 12-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 13-Jul-04 | Annual Leave | 08:00A | 01:00P | 5.00 Hours |
|    |               | Annual Leave | 01:30P | 04:30P | 3.00 Hours |
|    | Wed 14-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 15-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 16-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Mon 19-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 20-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 21-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 22-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 23-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Mon 26-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    |               | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    |               | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
| 15 | Wed 28-Jul-04 | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 29-Jul-04 | Annual Leave | 08:00A | 01:00P | 5.00 Hours |
|    |               | Annual Leave | 01:30P | 04:30P | 3.00 Hours |
|    | Fri 30-Jul-04 | Annual Leave | 08:00A | 09:00A | 1.00 Hour  |
|    |               | Annual Leave | 09:00A | NOON   | 3.00 Hours |
|    |               | Annual Leave | 12:30P | 04:30P | 4.00 Hours |
|    | Mon 2-Aug-04  | Annual Leave | 08:00A | 09:00A | 1.00 Hour  |
|    |               | Annual Leave | 09:00A | NOON   | 3.00 Hours |
|    |               | Annual Leave | 12:30P | 04:30P | 4.00 Hours |
|    | Tue 3-Aug-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 4-Aug-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 5-Aug-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 6-Aug-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Mon 9-Aug-04  | Annual Leave | 08:00A | 12:45P | 4.75 Hours |
|    |               | Sick Leave   | 01:15P | 04:30P | 3.25 Hours |
| 16 | Tue 10-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 11-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 12-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 13-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Mon 16-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 17-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 18-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 19-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 20-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Mon 23-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    |               | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 24-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 25-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 26-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 27-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |

DHCP PAID REPORT L003

VA TIME &amp; ATTENDANCE SYSTEM

## LEAVE USED SUMMARY

DATE: Oct 18, 2005

from: JAN 11, 2004 to: OCT 18, 2005

for: DUKES, ALBERTA M - T&amp;L: 652

| PP | DATE          | TYPE         | FROM   | TO     | LENGTH     |
|----|---------------|--------------|--------|--------|------------|
| 17 | Mon 30-Aug-04 | Sick Leave   | 08:00A | 12:45P | 4.75 Hours |
|    |               | Sick Leave   | 01:15P | 04:30P | 3.25 Hours |
|    | Tue 31-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 1-Sep-04  | Sick Leave   | 08:00A | 11:00A | 3.00 Hours |
|    |               | Sick Leave   | 11:30A | 01:15P | 1.75 Hours |
|    |               | Annual Leave | 01:15P | 04:30P | 3.25 Hours |
|    | Thu 2-Sep-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 3-Sep-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
| 18 | Mon 6-Sep-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 7-Sep-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 8-Sep-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 9-Sep-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 10-Sep-04 | Annual Leave | 08:00A | 11:00A | 3.00 Hours |
|    |               | Annual Leave | 11:30A | 01:45P | 2.25 Hours |
|    |               | Without Pay  | 01:45P | 04:30P | 2.75 Hours |
|    | Mon 13-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 14-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 15-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 16-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 17-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
| 19 | Mon 20-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 21-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 22-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 23-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 24-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Mon 27-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 28-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 29-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 30-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 1-Oct-04  | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
| 20 | Mon 4-Oct-04  | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 5-Oct-04  | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 6-Oct-04  | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 7-Oct-04  | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 8-Oct-04  | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Mon 11-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 12-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 13-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 14-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 15-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
| 21 | Mon 18-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 19-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 20-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 21-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 22-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Mon 25-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 26-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 27-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 28-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |

DHCP PAID REPORT L003

VA TIME &amp; ATTENDANCE SYSTEM

## LEAVE USED SUMMARY

DATE: Oct 18, 2005

from: JAN 11, 2004 to: OCT 18, 2005  
 for: DUKES, ALBERTA M - T&L: 652

| PP      | DATE          | TYPE               | FROM               | TO     | LENGTH       |
|---------|---------------|--------------------|--------------------|--------|--------------|
| 21      | Fri 29-Oct-04 | Without Pay        | 08:00A             | 04:30P | 8.00 Hours   |
| 22      | Mon 1-Nov-04  | Without Pay        | 08:00A             | 04:30P | 8.00 Hours   |
|         | Tue 2-Nov-04  | Without Pay        | 08:00A             | 04:30P | 8.00 Hours   |
|         | Wed 3-Nov-04  | Without Pay        | 08:00A             | 04:30P | 8.00 Hours   |
|         | Thu 4-Nov-04  | Without Pay        | 08:00A             | 04:30P | 8.00 Hours   |
|         | Fri 5-Nov-04  | Without Pay        | 08:00A             | 04:30P | 8.00 Hours   |
| 23      | Tue 16-Nov-04 | Annual Leave       | 03:30P             | 04:30P | 1.00 Hour    |
|         | Wed 24-Nov-04 | Annual Leave       | 02:30P             | 04:30P | 2.00 Hours   |
| 24      | Wed 8-Dec-04  | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
|         | Fri 10-Dec-04 | Annual Leave       | 08:00A             | 09:00A | 1.00 Hour    |
| 26      | Wed 5-Jan-05  | Authorized Absence | 02:30P             | 04:30P | 2.00 Hours   |
|         | Thu 6-Jan-05  | Annual Leave       | 08:00A             | 09:30A | 1.50 Hours   |
| 01      | Tue 18-Jan-05 | Annual Leave       | 08:00A             | 10:30A | 2.50 Hours   |
| 02      | Thu 27-Jan-05 | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
|         | Fri 28-Jan-05 | Annual Leave       | 11:30A             | 04:30P | 5.00 Hours   |
|         | Mon 31-Jan-05 | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
| 03      | Tue 8-Feb-05  | Annual Leave       | 08:00A             | 09:30A | 1.50 Hours   |
| 04      | Tue 22-Feb-05 | Annual Leave       | 08:00A             | 09:30A | 1.50 Hours   |
|         | Thu 3-Mar-05  | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
| 05      | Fri 11-Mar-05 | Authorized Absence | 02:30P             | 04:30P | 2.00 Hours   |
| 06      | Mon 28-Mar-05 | Annual Leave       | 08:00A             | 09:00A | 1.00 Hour    |
| 07      | Wed 6-Apr-05  | Annual Leave       | 08:00A             | 09:00A | 1.00 Hour    |
|         | Wed 13-Apr-05 | Annual Leave       | 10:30A             | NOON   | 1.50 Hours   |
| 08      | Mon 18-Apr-05 | Annual Leave       | 10:30A             | NOON   | 1.50 Hours   |
|         | Tue 19-Apr-05 | Annual Leave       | 01:30P             | 04:30P | 3.00 Hours   |
|         | Wed 20-Apr-05 | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
|         | Thu 21-Apr-05 | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
|         | Fri 22-Apr-05 | Annual Leave       | 11:00A             | 04:30P | 5.50 Hours   |
| 09      | Wed 11-May-05 | Annual Leave       | 03:30P             | 04:30P | 1.00 Hour    |
| 10      | Tue 17-May-05 | Authorized Absence | 08:00A             | 10:00A | 2.00 Hours   |
| 11      | Mon 6-Jun-05  | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
| 12      | Mon 13-Jun-05 | Authorized Absence | 08:00A             | 10:00A | 2.00 Hours   |
|         |               | Annual Leave       | 10:00A             | NOON   | 2.00 Hours   |
|         |               | Annual Leave       | 12:30P             | 04:30P | 4.00 Hours   |
|         | Mon 20-Jun-05 | Annual Leave       | 08:00A             | 09:00A | 1.00 Hour    |
| 13      | Wed 29-Jun-05 | Authorized Absence | 01:00P             | 02:30P | 1.50 Hours   |
|         |               | Annual Leave       | 02:30P             | 04:30P | 2.00 Hours   |
| 14      | Mon 18-Jul-05 | Annual Leave       | 08:00A             | NOON   | 4.00 Hours   |
|         |               | Annual Leave       | 12:30P             | 02:30P | 2.00 Hours   |
|         |               | Authorized Absence | 02:30P             | 04:30P | 2.00 Hours   |
| 16      | Mon 15-Aug-05 | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
| 17      | Mon 22-Aug-05 | Compensatory       | 08:00A             | 11:30A | 3.50 Hours   |
|         |               | Annual Leave       | NOON               | 04:30P | 4.50 Hours   |
| 20      | Wed 5-Oct-05  | Annual Leave       | 01:00P             | 04:30P | 3.50 Hours   |
|         | Fri 14-Oct-05 | Compensatory       | 01:30P             | 03:00P | 1.50 Hours   |
| TOTALS: |               |                    | Authorized Absence |        | 23.50 Hours  |
|         |               |                    | Annual Leave       |        | 535.75 Hours |
|         |               |                    | CompTime/CreditHrs |        | 5.00 Hours   |

DHCP PAID REPORT L003

VA TIME &amp; ATTENDANCE SYSTEM



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LEAVE USED SUMMARY  
 from: JAN 11, 2004 to: OCT 18, 2005  
 for: DUKES,ALBERTA M - T&L: 652

DATE: Oct 18, 2005

| PP | DATE          | TYPE               | FROM   | TO     | LENGTH     |
|----|---------------|--------------------|--------|--------|------------|
| 01 | Tue 20-Jan-04 | Annual Leave       | 01:30P | 04:30P | 3.00 Hours |
| 02 | Tue 27-Jan-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 28-Jan-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
| 03 | Tue 10-Feb-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
| 04 | Tue 24-Feb-04 | Annual Leave       | 08:00A | 08:30A | 0.50 Hours |
|    | Fri 27-Feb-04 | Sick Leave         | 12:30P | 04:30P | 4.00 Hours |
|    | Tue 2-Mar-04  | Sick Leave         | 02:30P | 04:30P | 2.00 Hours |
| 05 | Mon 8-Mar-04  | Sick Leave         | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 17-Mar-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 18-Mar-04 | Sick Leave         | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 19-Mar-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
| 06 | Mon 29-Mar-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 30-Mar-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
| 07 | Mon 5-Apr-04  | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 6-Apr-04  | Annual Leave       | 01:30P | 04:30P | 3.00 Hours |
|    | Wed 14-Apr-04 | Annual Leave       | 02:30P | 04:30P | 2.00 Hours |
|    | Thu 15-Apr-04 | Authorized Absence | 08:00A | 10:00A | 2.00 Hours |
|    |               | Annual Leave       | 10:00A | NOON   | 2.00 Hours |
|    |               | Annual Leave       | 12:30P | 04:30P | 4.00 Hours |
|    | Fri 16-Apr-04 | Authorized Absence | 08:00A | 10:00A | 2.00 Hours |
|    |               | Annual Leave       | 10:00A | NOON   | 2.00 Hours |
|    |               | Annual Leave       | 12:30P | 04:30P | 4.00 Hours |
| 08 | Mon 19-Apr-04 | Authorized Absence | 08:00A | NOON   | 4.00 Hours |
|    |               | Annual Leave       | 12:30P | 04:30P | 4.00 Hours |
|    | Tue 20-Apr-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 30-Apr-04 | Sick Leave         | 02:00P | 04:30P | 2.50 Hours |
| 09 | Wed 5-May-04  | Authorized Absence | 12:30P | 02:30P | 2.00 Hours |
|    |               | Annual Leave       | 02:30P | 04:30P | 2.00 Hours |
|    | Wed 12-May-04 | Sick Leave         | 08:00A | 04:30P | 8.00 Hours |
| 11 | Thu 3-Jun-04  | Sick Leave         | 10:00A | 11:00A | 1.00 Hour  |
|    | Fri 4-Jun-04  | Annual Leave       | 02:30P | 04:30P | 2.00 Hours |
|    | Mon 7-Jun-04  | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 8-Jun-04  | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 9-Jun-04  | Authorized Absence | 08:00A | 10:00A | 2.00 Hours |
|    |               | Annual Leave       | 10:00A | NOON   | 2.00 Hours |
|    |               | Annual Leave       | 12:30P | 02:00P | 1.50 Hours |
|    |               | Sick Leave         | 02:00P | 04:30P | 2.50 Hours |
|    | Thu 10-Jun-04 | Sick Leave         | 08:00A | 04:30P | 8.00 Hours |
| 12 | Tue 15-Jun-04 | Annual Leave       | 08:00A | 08:30A | 0.50 Hours |
|    | Thu 24-Jun-04 | Sick Leave         | 08:00A | NOON   | 4.00 Hours |
|    |               | Sick Leave         | 12:30P | 03:00P | 2.50 Hours |
|    |               | Annual Leave       | 03:00P | 04:30P | 1.50 Hours |
|    | Fri 25-Jun-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
| 13 | Mon 28-Jun-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 29-Jun-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 30-Jun-04 | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 1-Jul-04  | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 2-Jul-04  | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 6-Jul-04  | Annual Leave       | 08:00A | 04:30P | 8.00 Hours |

DHCP PAID REPORT L003

VA TIME &amp; ATTENDANCE SYSTEM

LEAVE USED SUMMARY  
 from: JAN 11, 2004 to: OCT 18, 2005  
 for: DUKES, ALBERTA M - T&L: 652

DATE: Oct 18, 2005

| PP            | DATE          | TYPE          | FROM         | TO         | LENGTH     |            |
|---------------|---------------|---------------|--------------|------------|------------|------------|
| 13            | Wed 7-Jul-04  | Annual Leave  | 08:00A       | NOON       | 4.00 Hours |            |
|               |               | Annual Leave  | 12:30P       | 04:15P     | 3.75 Hours |            |
|               |               | Sick Leave    | 04:15P       | 04:30P     | 0.25 Hours |            |
|               | Thu 8-Jul-04  | Sick Leave    | 08:00A       | 11:45A     | 3.75 Hours |            |
|               |               | Sick Leave    | 11:45A       | 12:45P     | 1.00 Hour  |            |
| Annual Leave  |               | 01:15P        | 04:30P       | 3.25 Hours |            |            |
|               | Fri 9-Jul-04  | Annual Leave  | 08:00A       | 04:30P     | 8.00 Hours |            |
| 14            | Mon 12-Jul-04 | Annual Leave  | 08:00A       | 04:30P     | 8.00 Hours |            |
|               | Tue 13-Jul-04 | Annual Leave  | 08:00A       | 01:00P     | 5.00 Hours |            |
|               |               | Annual Leave  | 01:30P       | 04:30P     | 3.00 Hours |            |
|               | Wed 14-Jul-04 | Annual Leave  | 08:00A       | 04:30P     | 8.00 Hours |            |
|               | Thu 15-Jul-04 | Annual Leave  | 08:00A       | 04:30P     | 8.00 Hours |            |
|               | Fri 16-Jul-04 | Annual Leave  | 08:00A       | 04:30P     | 8.00 Hours |            |
|               | Mon 19-Jul-04 | Annual Leave  | 08:00A       | 04:30P     | 8.00 Hours |            |
|               | Tue 20-Jul-04 | Annual Leave  | 08:00A       | 04:30P     | 8.00 Hours |            |
|               | Wed 21-Jul-04 | Annual Leave  | 08:00A       | 04:30P     | 8.00 Hours |            |
|               | Thu 22-Jul-04 | Annual Leave  | 08:00A       | 04:30P     | 8.00 Hours |            |
|               | Fri 23-Jul-04 | Annual Leave  | 08:00A       | 04:30P     | 8.00 Hours |            |
|               | Mon 26-Jul-04 | Annual Leave  | 08:00A       | 04:30P     | 8.00 Hours |            |
|               |               | Annual Leave  | 08:00A       | 04:30P     | 8.00 Hours |            |
|               |               | Annual Leave  | 08:00A       | 04:30P     | 8.00 Hours |            |
|               | Thu 29-Jul-04 | Annual Leave  | 08:00A       | 01:00P     | 5.00 Hours |            |
|               |               | Annual Leave  | 01:30P       | 04:30P     | 3.00 Hours |            |
|               |               | Annual Leave  | 08:00A       | 09:00A     | 1.00 Hour  |            |
|               |               | Annual Leave  | 09:00A       | NOON       | 3.00 Hours |            |
|               |               | Annual Leave  | 12:30P       | 04:30P     | 4.00 Hours |            |
|               |               | Annual Leave  | 08:00A       | 09:00A     | 1.00 Hour  |            |
| 15            | Mon 2-Aug-04  | Annual Leave  | 09:00A       | NOON       | 3.00 Hours |            |
|               |               | Annual Leave  | 12:30P       | 04:30P     | 4.00 Hours |            |
|               |               | Annual Leave  | 08:00A       | 04:30P     | 8.00 Hours |            |
|               | Tue 3-Aug-04  | Annual Leave  | 08:00A       | 04:30P     | 8.00 Hours |            |
|               | Wed 4-Aug-04  | Annual Leave  | 08:00A       | 04:30P     | 8.00 Hours |            |
|               | Thu 5-Aug-04  | Annual Leave  | 08:00A       | 04:30P     | 8.00 Hours |            |
|               | Fri 6-Aug-04  | Annual Leave  | 08:00A       | 04:30P     | 8.00 Hours |            |
|               | 16            | Mon 9-Aug-04  | Annual Leave | 08:00A     | 12:45P     | 4.75 Hours |
|               |               |               | Sick Leave   | 01:15P     | 04:30P     | 3.25 Hours |
|               |               | Tue 10-Aug-04 | Sick Leave   | 08:00A     | 04:30P     | 8.00 Hours |
|               |               | Wed 11-Aug-04 | Sick Leave   | 08:00A     | 04:30P     | 8.00 Hours |
|               |               | Thu 12-Aug-04 | Sick Leave   | 08:00A     | 04:30P     | 8.00 Hours |
|               |               | Fri 13-Aug-04 | Sick Leave   | 08:00A     | 04:30P     | 8.00 Hours |
|               |               | Mon 16-Aug-04 | Sick Leave   | 08:00A     | 04:30P     | 8.00 Hours |
|               |               | Tue 17-Aug-04 | Sick Leave   | 08:00A     | 04:30P     | 8.00 Hours |
| Wed 18-Aug-04 |               | Sick Leave    | 08:00A       | 04:30P     | 8.00 Hours |            |
| Thu 19-Aug-04 |               | Sick Leave    | 08:00A       | 04:30P     | 8.00 Hours |            |
| Fri 20-Aug-04 |               | Sick Leave    | 08:00A       | 04:30P     | 8.00 Hours |            |
| 17            |               | Mon 23-Aug-04 | Sick Leave   | 08:00A     | 04:30P     | 8.00 Hours |
|               |               | Tue 24-Aug-04 | Sick Leave   | 08:00A     | 04:30P     | 8.00 Hours |
|               |               | Wed 25-Aug-04 | Sick Leave   | 08:00A     | 04:30P     | 8.00 Hours |
|               |               | Thu 26-Aug-04 | Sick Leave   | 08:00A     | 04:30P     | 8.00 Hours |
|               | Fri 27-Aug-04 | Sick Leave    | 08:00A       | 04:30P     | 8.00 Hours |            |

DHCP PAID REPORT L003

VA TIME &amp; ATTENDANCE SYSTEM

LEAVE USED SUMMARY  
 from: JAN 11, 2004 to: OCT 18, 2005  
 for: DUKES, ALBERTA M - T&L: 652

DATE: Oct 18, 2005

| PP | DATE          | TYPE         | FROM   | TO     | LENGTH     |
|----|---------------|--------------|--------|--------|------------|
| 17 | Mon 30-Aug-04 | Sick Leave   | 08:00A | 12:45P | 4.75 Hours |
|    |               | Sick Leave   | 01:15P | 04:30P | 3.25 Hours |
|    | Tue 31-Aug-04 | Sick Leave   | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 1-Sep-04  | Sick Leave   | 08:00A | 11:00A | 3.00 Hours |
|    |               | Sick Leave   | 11:30A | 01:15P | 1.75 Hours |
|    |               | Annual Leave | 01:15P | 04:30P | 3.25 Hours |
|    | Thu 2-Sep-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 3-Sep-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
| 18 | Mon 6-Sep-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 7-Sep-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 8-Sep-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 9-Sep-04  | Annual Leave | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 10-Sep-04 | Annual Leave | 08:00A | 11:00A | 3.00 Hours |
|    |               | Annual Leave | 11:30A | 01:45P | 2.25 Hours |
|    |               | Without Pay  | 01:45P | 04:30P | 2.75 Hours |
|    | Mon 13-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 14-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 15-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 16-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 17-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
| 19 | Mon 20-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 21-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 22-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 23-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 24-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Mon 27-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 28-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 29-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 30-Sep-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 1-Oct-04  | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
| 20 | Mon 4-Oct-04  | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 5-Oct-04  | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 6-Oct-04  | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 7-Oct-04  | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 8-Oct-04  | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Mon 11-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 12-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 13-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 14-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 15-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
| 21 | Mon 18-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 19-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 20-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 21-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Fri 22-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Mon 25-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Tue 26-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Wed 27-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |
|    | Thu 28-Oct-04 | Without Pay  | 08:00A | 04:30P | 8.00 Hours |

DHCP PAID REPORT L003

VA TIME &amp; ATTENDANCE SYSTEM

## LEAVE USED SUMMARY

DATE: Oct 18, 2005

from: JAN 11, 2004 to: OCT 18, 2005

for: DUKES,ALBERTA M - T&amp;I: 652

| PP      | DATE          | TYPE               | FROM               | TO     | LENGTH       |
|---------|---------------|--------------------|--------------------|--------|--------------|
| 21      | Fri 29-Oct-04 | Without Pay        | 08:00A             | 04:30P | 8.00 Hours   |
| 22      | Mon 1-Nov-04  | Without Pay        | 08:00A             | 04:30P | 8.00 Hours   |
|         | Tue 2-Nov-04  | Without Pay        | 08:00A             | 04:30P | 8.00 Hours   |
|         | Wed 3-Nov-04  | Without Pay        | 08:00A             | 04:30P | 8.00 Hours   |
|         | Thu 4-Nov-04  | Without Pay        | 08:00A             | 04:30P | 8.00 Hours   |
|         | Fri 5-Nov-04  | Without Pay        | 08:00A             | 04:30P | 8.00 Hours   |
| 23      | Tue 16-Nov-04 | Annual Leave       | 03:30P             | 04:30P | 1.00 Hour    |
|         | Wed 24-Nov-04 | Annual Leave       | 02:30P             | 04:30P | 2.00 Hours   |
| 24      | Wed 8-Dec-04  | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
|         | Fri 10-Dec-04 | Annual Leave       | 08:00A             | 09:00A | 1.00 Hour    |
| 26      | Wed 5-Jan-05  | Authorized Absence | 02:30P             | 04:30P | 2.00 Hours   |
|         | Thu 6-Jan-05  | Annual Leave       | 08:00A             | 09:30A | 1.50 Hours   |
| 01      | Tue 18-Jan-05 | Annual Leave       | 08:00A             | 10:30A | 2.50 Hours   |
| 02      | Thu 27-Jan-05 | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
|         | Fri 28-Jan-05 | Annual Leave       | 11:30A             | 04:30P | 5.00 Hours   |
|         | Mon 31-Jan-05 | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
| 03      | Tue 8-Feb-05  | Annual Leave       | 08:00A             | 09:30A | 1.50 Hours   |
| 04      | Tue 22-Feb-05 | Annual Leave       | 08:00A             | 09:30A | 1.50 Hours   |
|         | Thu 3-Mar-05  | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
| 05      | Fri 11-Mar-05 | Authorized Absence | 02:30P             | 04:30P | 2.00 Hours   |
| 06      | Mon 28-Mar-05 | Annual Leave       | 08:00A             | 09:00A | 1.00 Hour    |
| 07      | Wed 6-Apr-05  | Annual Leave       | 08:00A             | 09:00A | 1.00 Hour    |
|         | Wed 13-Apr-05 | Annual Leave       | 10:30A             | NOON   | 1.50 Hours   |
| 08      | Mon 18-Apr-05 | Annual Leave       | 10:30A             | NOON   | 1.50 Hours   |
|         | Tue 19-Apr-05 | Annual Leave       | 01:30P             | 04:30P | 3.00 Hours   |
|         | Wed 20-Apr-05 | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
|         | Thu 21-Apr-05 | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
|         | Fri 22-Apr-05 | Annual Leave       | 11:00A             | 04:30P | 5.50 Hours   |
| 09      | Wed 11-May-05 | Annual Leave       | 03:30P             | 04:30P | 1.00 Hour    |
| 10      | Tue 17-May-05 | Authorized Absence | 08:00A             | 10:00A | 2.00 Hours   |
| 11      | Mon 6-Jun-05  | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
| 12      | Mon 13-Jun-05 | Authorized Absence | 08:00A             | 10:00A | 2.00 Hours   |
|         |               | Annual Leave       | 10:00A             | NOON   | 2.00 Hours   |
|         |               | Annual Leave       | 12:30P             | 04:30P | 4.00 Hours   |
|         | Mon 20-Jun-05 | Annual Leave       | 08:00A             | 09:00A | 1.00 Hour    |
| 13      | Wed 29-Jun-05 | Authorized Absence | 01:00P             | 02:30P | 1.50 Hours   |
|         |               | Annual Leave       | 02:30P             | 04:30P | 2.00 Hours   |
| 14      | Mon 18-Jul-05 | Annual Leave       | 08:00A             | NOON   | 4.00 Hours   |
|         |               | Annual Leave       | 12:30P             | 02:30P | 2.00 Hours   |
|         |               | Authorized Absence | 02:30P             | 04:30P | 2.00 Hours   |
| 16      | Mon 15-Aug-05 | Annual Leave       | 08:00A             | 04:30P | 8.00 Hours   |
| 17      | Mon 22-Aug-05 | Compensatory       | 08:00A             | 11:30A | 3.50 Hours   |
|         |               | Annual Leave       | NOON               | 04:30P | 4.50 Hours   |
| 20      | Wed 5-Oct-05  | Annual Leave       | 01:00P             | 04:30P | 3.50 Hours   |
|         | Fri 14-Oct-05 | Compensatory       | 01:30P             | 03:00P | 1.50 Hours   |
| TOTALS: |               |                    | Authorized Absence |        | 23.50 Hours  |
|         |               |                    | Annual Leave       |        | 535.75 Hours |
|         |               |                    | CompTime/CreditHrs |        | 5.00 Hours   |

DHCP PAID REPORT L003

VA TIME &amp; ATTENDANCE SYSTEM



IN THE UNITED STATES DISTRICT COURT  
FOR THE WESTERN DISTRICT OF TEXAS  
AUSTIN DIVISION

ALBERTA DUKES,

Plaintiff,

v.

R. JAMES NICHOLSON,  
Secretary of Veterans Affairs,  
Department of Veterans Affairs,

Defendant.

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CIVIL ACTION NO. A-04-CA-743-SS

DECLARATION OF GREGORY THOMPkins

My name is Gregory Thompkins. I am currently a Civilian Payroll Technician at the Central Texas Veterans Health Care System, Temple, Texas (Temple VAMC). I have been in that position since 1-Jun-2003, and since that time and in that capacity I process time and attendance records, make manual pay adjustments as necessary, teach timekeepers and their supervisors how to maintain time and attendance records.

Part of my duties as Civilian Payroll Technician consist of reviewing and analyzing payroll records. I have reviewed the relevant VA payroll records of Alberta Dukes and ascertained that Ms. Dukes was paid for advanced sick leave and donated annual leave in the total amount of \$4789.20. The first payment was made on 21-Jul-04 and the last payment was made on 5-Nov-04.<sup>1</sup> The advanced and donated leave received by Ms. Dukes was paid at her salary rate at the time which was a GS-679-5, Step 7.

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<sup>1</sup> Advanced and/or donated leave payments are paid as "out of system payments;" therefore, the amounts would not show on her normal leave and earnings statements.

I declare under penalty of perjury that the foregoing facts are true and correct to the best of my knowledge, information, and belief.

Executed on November 9, 2005.

A handwritten signature in black ink, appearing to read 'Thompkins', with a stylized flourish extending from the end.

GREGORY THOMPCKINS  
Civilian Payroll Technician  
Central Texas Veterans Health Care System  
Temple, Texas